## PART B - FEE(S) TRANSMITTAL

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				(Date
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/595,400	02/02/2007	Zoser B. Salama	7014-110	8658

TITLE OF INVENTION: METHOD FOR THE PREPARATION OF TRANS-OR CIS-DIAMMONIUMDICHLORODIHYDROXOPLATINUM(IV) AND THE USE THEREOF IN THE PRODUCTION OF PHARMACEUTICAL ACTIVE SUBSTANCES

R. 1.563).  Ghange of correspondence address (or Change of Correspondence Address Tom PTOSB/122) attached.  The Address Indication (or 'Fee Address' Indication form PTOSB/123) or recent) attached. Use of a Customer of Correspondence address Indication (or 'Fee Address' Indicat	APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(8) DUE	DATE DUE	
NAZARIO GONZALEZ, PORFIRIO 1621 556-137000  Change of correspondence address or indication of "Fee Address" (37   Change of correspondence address for micross 1/2 address	nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/16/2010	
Change of correspondence address or indication of "Fee Address" (37 to 1.56.), and the patent front page, list (1) the names of up to 3 registered patent attorneys against OR, alternatively, against OR, alterna	EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
R. 1.563).  Ghange of correspondence address (or Change of Correspondence Address Tom PTOSB/122) attached.  The Address Indication (or 'Fee Address' Indication form PTOSB/123) or recent) attached. Use of a Customer of Correspondence address Indication (or 'Fee Address' Indicat	NAZARIO GONZALEZ, PORFIRIO 1621			556-137000	-			
	I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).  Change of correspondence address (or Change of Correspondence Address form PTOS98122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTOS9847; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(I) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is		er a 2 Pequignot &	-	

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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

RIEMSER Arzneimittel AG Germany Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💥 Corporation or other private group entity 🚨 Government

4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed.

Payment is electronically submitted Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge overpayment, to Deposit Account Number 50-3135 Advance Order - # of Copies 2 any deficiency, or credit any

(enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above)

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature /Joyce v. Natzmer/ Date February 9, 2010 Typed or printed name Joyce von Natzmer Registration No. 48,120

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